MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10764510
APPLICANT(S)
FILING DATE 0F27-04

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				IND	DEP	IND	DEP	IND	DEP
	IND	DEP	IND	DEP	IND	DEP								
1	1						51							
2	1						52							
3		2					53							
4		2					54							
5		2					55							
6		2					56							
7		2					57							
8		2					58							
9		1					59							
10		1					60							
11							61							
12		1					62							
13		1					63							
14		1					64							
15	1						65							
16	1						66							
17		2					67							
18		2					68							
19		2					69							
20		2					70							
21		2					71							
22		2					72							
23		2					73							
24		2					74							
25		1					75							
26		1					76							
27		2					77							
28		2					78							
29							79							
30							80							
31							81							
32							82							
33							83							
34							84							
35							85							
36							86							
37							87							
38							88							
39							89							
40							90							
41							91							
42							92							
43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
TOTAL IND.	4						TOTAL IND.							
TOTAL DEP.	40						TOTAL DEP.							
TOTAL CLAIMS	44						TOTAL CLAIMS							